## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINCED NAME OF SIGNING OFFICER OR DIRECTOR

## Apr 30, 2007 8:00 am Secretary of State DOCUMENT # P97000088946 1. Entity Name 04-30-2007 90457 033 \*\*\*150.00 DESIGN PROPERTIES, INC. Principal Place of Business Mailing Address 2913 WESTSIDE BLVD. 2913 WESTSIDE BLVD. ZUUULZUN JACKSONVILLE, FL 32209 JACKSONVILLE, FL 32209 2 Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04232007 Cha-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 59-3479415 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BRANT, ABRAHAM, RETTER, MC CORMICK & GREENE, P. A. Street Address (P.O. Box Number is Not Acceptable) BRANT, ABRAHAM, REITER, & MCMORMICK, P.A. 50 NORTH LAURA STREET 50 NORTH LAURA STREET **SUITE 2750** JACKSONVILLE, FL 32202 Zip Code JACKSONVILLE, FL 32202 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent JAN D. MCCORMICK, UP (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. THILE ☐ Defete TITLE ☐ Change ☐ Addition VICKERS, EDGAR B NAME MAME 2913 WESTSIDE BLVD. STREET ADDRESS STREET ADDRESS JACKSONVILLE, FL 32209 CITY-ST-ZIP CHY-ST-7/P THILE ☐ Defete TITLE Change Addition TALBOT, THOMAS W NAME NAME 2913 WESTSIDE BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-7/P JACKSONVILLE, FL 32209 CITY-ST-7IP ☐ Change □ Delete TITLE ☐ Addition TITLE KELLEY, JR, GERALD P NAME 2913 WESTSIDE BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP JACKSONVILLE, FL 32209 ☐ Delete Change Addition DHE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete THLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP THILE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-71P 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental expirt is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or tracted empowered to execute this report as required by Shapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

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